



FOR OFFICIAL USE ONLY				
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Authorized Signature	Date	Co \ Div	Site	Status \ Salary

EMPLOYMENT APPLICATION

GENERAL INSTRUCTIONS

1. Complete the application in it's entirety with black or blue ink.
2. Specify the position for which you are applying.
3. Sign and date application where indicated. All provided information is subject to verification.
4. Return the application to your first interviewer.

POSITION APPLIED FOR

Location Address _____

Title _____

Referral Source _____

Date Available _____

Hours Available _____

Minimum Acceptable Salary _____

CONTACT INFORMATION

Your Name _____

Mailing Address _____

City, State, Zip Code _____

Home Phone Number _____

Alternate Phone Number _____

Personal E-mail Address _____

EDUCATION

High School

Name / Location of School _____ Received: Diploma Other (specify) _____ None

Your name, if different while attending high school: _____

College, University or Professional Schools (TRANSCRIPTS MAY BE REQUIRED)

Name of School	City, State	Dates of Attendance (Mth / Yr)		Course of Study	Type of Degree Earned
		From	To		

Your name, if different while attending college, university, or other professional school: _____

Job-Related Training or Coursework (VOCATIONAL, TRADE, BUSINESS, ETC.)

Name of School	City, State	Dates of Attendance (Mth / Yr)		Course of Study	Training Completed?	
		From	To		Yes	No

Your name, if different while attending training: _____

License, Designation, Certification (CPA, CMA, CPM, PHR, CEBS)	Number \ State	Date Received	Expiration Date

EMPLOYMENT RECORD

Describe your work experience in detail, beginning with your current or most recent position. Include any military service in the United States military (indicate final rank) as well as any job-related volunteer work. If you served as a Supervisor, please indicate the number of employees supervised. **Use a separate block to describe each position or any gaps in employment.** If needed, attach additional sheets, using the same format, as on this application. ALL information in this section must be completed. *Resumes may be attached to provide additional information, ONLY - not in lieu of filling out the information on this application.* Use additional sheets if necessary.

1. Name of Present or Most Recent Employer: _____

Address: _____

Phone Number: _____

Job Title: _____

Supervisor's Name and Title: _____

From: ____/____/____ To: ____/____/____
month day year month day year

May we contact him \ her? Yes No

Ending Salary: _____

Name (if different while employed) _____

Duties & Responsibilities: _____

Reason for Leaving: _____

2. Name of Next Previous Employer: _____

Address: _____

Phone Number: _____

Job Title: _____

Supervisor's Name and Title: _____

From: ____/____/____ To: ____/____/____
month day year month day year

May we contact him \ her? Yes No

Ending Salary: _____

Name (if different while employed) _____

Duties & Responsibilities: _____

Reason for Leaving: _____

3. Name of Next Previous Employer: _____

Address: _____

Phone Number: _____

Job Title: _____

Supervisor's Name and Title: _____

From: ____/____/____ To: ____/____/____
month day year month day year

May we contact him \ her? Yes No

Ending Salary: _____

Name (if different while employed) _____

Duties & Responsibilities: _____

Reason for Leaving: _____

4. Name of Next Previous Employer: _____

Address: _____

Phone Number: _____

Job Title: _____

Supervisor's Name and Title: _____

From: ____/____/____ To: ____/____/____
month day year month day year

May we contact him \ her? Yes No

Ending Salary: _____

Name (if different while employed) _____

Duties & Responsibilities: _____

Reason for Leaving: _____

KNOWLEDGE \ SKILLS \ ABILITIES

Please describe the knowledge, skills, and/or abilities you possess and believe are relevant to the position you seek.

BACKGROUND INFORMATION

Have you ever been convicted of any felonies and/or or misdemeanors? YES NO

If "yes", what charges? _____

Where convicted? _____ Date of Conviction? _____

Have you ever pled "guilty" or "no contest" to a crime, which is a felony or misdemeanor? YES NO

If "yes", what charges? _____

Where? _____ Date of Conviction? _____

Note: A "yes" answer will not automatically bar you from employment. The nature, job-relatedness, severity, and date of the offense in relation to the position for which you are applying are considered.

OTHER INFORMATION

Are you able, with or without reasonable accommodation, to perform all of the essential functions of the position for which you are applying?

YES NO

Are there any functions of the position for which you are applying that you cannot perform with or without reasonable accommodation?

YES If so, please describe. _____

NO

Are you younger than 18 years of age? YES NO

Have you ever filed an application here before? YES: If yes, approximate date _____ NO

Have you ever been employed here before? YES: If yes, dates of employment _____ NO

REFERENCES

Please list three professional references (no relatives please)

Name Professional Relationship Telephone Number Years of Acquaintance

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APPLICANT'S STATEMENT

I understand that any employment offered is "at-will", meaning that I may be discharged with or without notice and with or without cause at the complete discretion of the employer. This "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the chief executive officer of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I authorize the employer to thoroughly investigate my work and personal history, verify all data given on this application, on related papers, and in interviews, and require me to take a drug test as a condition of employment. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

In making this application for employment, I certify that the facts set forth in this application are true and complete to the best of my knowledge and understand that any falsification or material omission shall be sufficient cause for dismissal or refusal of employment.

Your Signature: _____ Date: _____

Equal Employment Opportunity Survey

CONFIDENTIAL INFORMATION

Government agencies require periodic reports on the sex, ethnicity, disability and veteran status of applicants. You are invited to submit this information on a **voluntary basis** and refusing to provide it will not subject you to any adverse treatment. Your information will be kept confidential and used only for the purposes of complying with government record-keeping requirements. This information will not be used in any hiring decisions. Identification can be declared at any time prior to, or if applicable, after hire. Please return this page with your application.

Check one:

- Male Female

Check one of the following:

Race/Ethnic Group:

- Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- White** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American** - A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander** - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- American Indian or Alaska Native** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- Two or More Races** - All persons who identify with more than one of the above five races.

Personal and Confidential

This page contains sensitive information, store in secure "EEO" files, separately from personnel records!